

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M. G.		1/4/2000
O.I.P.E. CLASSIFIER		7160	1/14/00
FORMALITY REVIEW	MA		2/11/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/14/00
2	✓	✓	1/14/00
3	✓	✓	1/14/00
4	✓	✓	1/14/00
5	✓	✓	1/14/00
6	✓	✓	1/14/00
7	✓	✓	1/14/00
8	✓	✓	1/14/00
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13	✓	✓	1/14/00
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If more than 150 claims or 10 actions  
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